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### **COVER LETTER**

	Division of Corporations
SUBJECT	Pristine Cleaning & Home Watch LLC
SCHOLE	Name of Limited Liability Company
The enclo	sed Articles of Organization and fee(s) are submitted for filing.
Please reti	urn all correspondence concerning this matter to the following:
	Jennifer Updyke .
	Name of Person
	Pristine Cleaning & Home Watch LLC
	Firm/Company
	3641 15th Ave SW
	Address
	Naples, FL 34117
	City/State and Zip Code
	Jennifer.Pristine@gmail.com
	E-mail address: (to be used for future annual report notification)
For further	information concerning this matter, please call:
	Jennifer Updyke 330 565-3165
	Name of Person Area Code Daytime Telephone Number
Enclosed i	s a check for the following amount:
\$125.00 F	Siling Fee \$\ \text{S130.00 Filing Fee & Certificate of Status} \ \text{Certified Copy (additional copy is enclosed)} \ \text{S160.00 Filing Fee, Certified Copy (additional copy is enclosed)} \ \text{Certified Copy (additional copy is enclosed)} \ Certified

# **Mailing Address**

New Filing Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

# Street Address

New Filing Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

#### ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

Pristine Cleaning & Home Watch LLC	
(Must end with the words "Limited Liab	ility Company, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address of the principal office  Principal Office Address:	of the Limited Liability Company is:  Mailing Address:
Timelput Office (2001-05).	Transmit I read \$550
3641 15th Ave SW	3641 15th Ave SW
•	<del></del>

The name and the Florida street address of the registered agent are:

Name

3641 15th Ave SW
Florida street address (P.O. Box NOT acceptable)

Naples Florida 34117

City State Zip

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S..

Registered Agent's Signature (REQUIRED)

(CONTINUED)

Page 1 of 2

THE THE PERSON NAMED IN CO.

# ARTICLE IV-The name and address of each person authorized to manage and control the Limited Liability Company: Title: Name and Address: "AMBR" = Authorized Member "MGR" = Manager AMBR Jennifer Updyke 3641 15th Ave SW Naples, FL 34117 (Use attachment if necessary) ARTICLE V: Effective date, if other than the date of filing: \_\_\_\_\_\_\_. (OPTIONAL) (If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.) Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records. **ARTICLE VI:** Other provisions, if any. REOUIRED SIGNATURE:

Signature of a member or an authorized representative of a member.

This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes.

This document is executed in accordance with Section 605.0203 (1) (b), Florida Statutes. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

Jennifer Updyke

Typed or printed name of signee

#### Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent \$30.00 Certified Copy (Optional)

3 30.00 Certified Copy (Optionar)

\$ 5.00 Certificate of Status (Optional)